

University of the Philippines Cebu OFFICE OF STUDENT AFFAIRS Gorordo, Avenue, Lahug, Cebu City

Dormitory Application Form

Procedure:

- 1. Fill out the form and attach one copy of each of the following:
 - a. Copy of Income Tax Returns (or BIR Certificate of Tax Exemption) of both parents for the previous year.
 - b. 1 piece 2x2 Picture.
 - c. Copy of UP Form 5
 - d. Copy of Grades of the 2 previous semesters (for old residents only)
- 2. Email to: dorm.upcebu@up.edu.ph / Telephone Numbers: 232-8185 Or 232-8187 local: 113

*Please Check: OLD Appli	cant (<u> </u>) NEW Appli	cant (<u> </u>	orm Applied f	or: Liadlaw	Hall ()Aircon (Lihangin Hall	
Name:			Student#: _		Course & Year Level:	VAAS:	
Last	First	Middle Name					
Gender:		Age:	Date of	Birth:	Blood	d Type:	
Tel./CP#:	FB:		Email:				
Academic Year:	First Seme	ster () Seco	nd Semester () Summer () Annual Family Income	:	
Home Address:							
	House No. & Stre	et	Barangay		Municipality/City	Province	
 Physical disability 	or special needs, if any:						
 Allergies/Allergic t 	o, if any:						
 Medications/Ma 	aintenance if any and	for what:					
Father's Name:	Mother's Name:						
Occupation:			Occupat	ion:			
Office Address:			Office A	ddress:			
CP# &Email:_			CP# &En	nail:			
Relative/s Living in Cebu:							
Last		ast	First		t	Middle	
Others Scholarship Enjoyed			Month	ly Allowance	/Stipend:		
In case of Emergency Contact:				Relationship:		el. CP#:	
	Last	First	Middle				
Address:							
	Vo. & Street	Barangay	у	Municipo	ality/City	Province	
I pledge, in my honor that all t	he information provided	herein are true a	nd correct				
r preuge, iii iiiy nonor anacan c	ne information provided	Treferrate trac a	na correct.				
			Conform	ie:			
Signature of Applicant			Name and Signature of Parent/Guardian				
Date			_	Date			

June 2023/zlt